PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10633717

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			9				Г	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		-	SIC FEE		OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS) minus 3 =		*			X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	"0" in column 2		OTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)						(Caluma = 0)	c	MALL E	NTITY	OR	OTHER SMALL	
	<u> </u>	(Column 1) CLAIMS		HIGH		(Column 3)		1		on I	OMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** -		=)	K\$ 9=	,	OR	X\$18=	
	Independent	* NTATION OF MI	Minus	*** PENDENT	CL AIM	=		X42=		OR	X84=	
لببا	11101111100		JE111 CE DE1	LINDLIN	OBWW		\	140=		OR	+280=	
							ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAINA	=		X42=		OR	X84≃	
	T THO T THEOL	IVIATION OF IME	DETIFIE DEF	ENDENT	CLAIIVI		 	140≈		OR	+280=	
							ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
	<u> </u>	(Column 1)	* * * * * * * * * * * * * * * * * * *	(Colur	nn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AIAA	=)	(42=		OR	X84=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=		OR	+280≈	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR.	TOTAL ADDIT. FEE	
***	If the "Highest Nu The "Highest Nun	mber Previously Pai ber Previously Pai	aid For" IN THI d For" (Total or	S SPACE i Independe	s less tha ent) is the	n 3, enter "3." highest numbe			ropriate box			